

CITY OF GROVE CITY 4035 Broadway Grove City, Ohio 43123 (614) 277-3000 Fax (614) 277-3011 www.ci.grove-city.oh.us

DEVELOPMENT PLAN APPLICATION FEE \$300.00

Date Submitted 04/13/2015

				- 3
PROJECT INFORMATI	ON			
PROJECT NAME				
	orary, Southwest Public :	.thranes		
PROPERTY LOCATION/ADDRE	SS			
PARCEL TAX ID#				
<u> </u>	<u>10236,</u> 040-000)41 6, 040-0004	+76,040-000464 C	740-000
EXISTING ZONING	tral Business District	PROPOSED ZONING	+76,040-000464, C	
PROPERTY OWNER('S)	trai business District	(CR)	D) Central Business District	
City of	Grove City			
MAILING ADDRESS				
4035 Broad DAYTIME TELEPHONE	adway, Grove City OH, 4			
() 614-277-3000	FAX NUMBER () 614-277-30	E-MA		1
(7 014-277-0000	11 1014-211-30	CDO	so@grovecityohio.gov	
APPLICANT/AGENT				
NAME OF APPLICANT	Solutions			
MAILING ADDRESS				
	a Place Suite 220 Colum	ibus OH 43215		
DAYTIME TELEPHONE () 614-280-4065	FAX NUMBER () 614-280-506	E-MA	IL playlor@-iti	_
DESIGNATED CONTACT PERSO	The state of the s	DAYTIME TELEPHONE	plawler@pizzuti.com	_
Patrick Lawler, Project Mana	ager	() 614-28 0-4065		4.1
	<u> </u>			_1
				\neg
I, Patrick A. Lawler		, the applicant or the applica	ant's duly authorized agent, have	
read and understand the contents of a	his submittal. The information	n contained including attach	ed exhibite is complete and must	
correct, to the best of my knowledge	. A completed checklist and r	equired checklist items accor-	mpanies this application.	ļ
Site visits to the property may be new	essary by City representatives	s. The Owner/Applicant her	chy authorizes representatives to	
visit and/or photograph the property	described in this application.	• • • • • • • • • • • • • • • • • • • •	*	
Patrick A. I Signature of Applicant	awler a see you go you and a see	D.A.	20100414	
	11,000	Date	20150414	
Signature of Owner	L. Best of	Date	04/10/15	
	·			
FOR OFFICE USE ONLY	The state of the s			
	YMENT RECEIVED AMOUR	NT TRECEIVED BY	CHECK #	7
04/14/10				

Page 1 of 3